

**From:** Blanco-Gonzalez, Joel  
**Sent:** Monday, December 15, 2014 4:14 PM  
**To:** Ateyeh, Laurel <lateyeh@pa.gov>  
**Cc:** Patel, Pravin <prpatel@pa.gov>; Trulear, Brian <Trulear.Brian@epa.gov>; Cruz, Francisco <Cruz.Francisco@epa.gov>  
**Subject:** RE: Draft Permit Comments - Horsham Water & Sewer Authority - PA0051985 A2

Thank you for replying to our comments, Laurel. Based on our e-mail correspondence, we will not be providing any additional comment regarding the issuance of this draft permit.

If you have any questions concerning this matter, please contact us.

Respectfully,

Joel

Joel Blanco-González  
NPDES Permits Branch (3WP41)  
Office of Permits and Enforcement  
Water Protection Division | U.S. EPA Region III  
1650 Arch Street | Philadelphia, PA 19103 - 2029  
Phone: (215) 814 - 2768 | Fax: (215) 814 - 2302  
Email: [blanco-gonzalez.joel@epa.gov](mailto:blanco-gonzalez.joel@epa.gov)

**From:** Ateyeh, Laurel [<mailto:lateyeh@pa.gov>]  
**Sent:** Monday, December 15, 2014 11:35 AM  
**To:** Blanco-Gonzalez, Joel  
**Cc:** Patel, Pravin; Trulear, Brian; Cruz, Francisco  
**Subject:** RE: Draft Permit Comments - Horsham Water & Sewer Authority - PA0051985 A2

Joel,

We are not using the WER Study Review Checklist for Park Creek since we only became aware of it with your email and this amendment is in the permitting stage. Both parties (EPA and DEP) have given approval to the WER and the approval was conveyed to the permittee. However, for future WER studies, we will use the checklist and provide it to the permittee so that they understand all information that needs to be included in the study and final report.

For Park Creek STP, the following discussion and attachments will be included in the fact sheet prior to issuance of the final permit:

During the two sampling events for the WER, 7/19/2013 and 8/21/2013, effluent samples were collected and analyzed. Although limits are typically expressed as average monthly values, the effluent

concentrations reported in Tables 4, 5, and 6, for which effluent limits are established in the permit, were in compliance with limits. Discharge monitoring reports for July and August indicated no violations of effluent limits and there were no reported plant upsets during either month. Additionally, the daily effluent monitoring reports for both months, which are used for DMR compliance reporting, reflect pollutant concentrations similar or equal to the values reported in Tables 4, 5 and 6. The sampling results for the WER indicate that the effluent varied within an acceptable and expected range for a treatment plant operating normally.

### 3.0 RESULTS AND DISCUSSION

#### 3.1 Characterization of Effluent

Water samples were collected on 7/19/13 and 8/21/13. The effluent quality varied with each sample as expected (Tables 4 - 6). The test solutions were monitored for metal concentrations and all toxicity endpoints (e.g., LC<sub>50</sub> values) and WER values were based on concentrations measured in the test solutions and not in the ambient water prior to laboratory manipulation.

**Table 4.** Water quality of effluent, upstream, simulated downstream water and laboratory water.

Collection Date	Sample	Cond (µmhos)	pH (su)	Hardness (mg/L)	TSS (mg/L)	DOC (mg/L)	TOC (mg/L)
7/19/13	Effluent	1138	7.2	264	3.2	6.1	7.0
	Upstream	448	6.7	132	1.0	2.8	2.7
	Simulated Downstream	1034	7.2	274	2.3	5.2	5.3
	Laboratory	660	8.1	162	3.0	ND (<0.5)	ND (<0.5)
8/21/13	Effluent	1164	6.9	240	2.7	6.0	7.3
	Upstream	454	7.1	132	5.7	2.4	2.3
	Simulated Downstream	1045	7.4	230	2.0	5.5	6.2
	Laboratory	697	8.1	148	ND (<1.0)	ND (<0.5)	ND (<1.0)

Abbreviations: TSS – Total Suspended Solids, DOC – Dissolved Organic Carbon, TOC – Total Organic Carbon, ND- Non-detect.

**Table 5.** Additional effluent water quality.

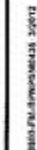
Collection Date	CBOD5 (mg/L)	Nitrate-Nitrite (mg/L)	Ammonia Nitrogen (mg/L)	TKN (mg/L)	Total Phosphorous (mg/L)	Total Lead (mg/L)	Fecal Coliform (No./100 mL)
7/19/13	ND (<2)	8.52	ND (<0.1)	3.0	0.16	ND (<0.01*)	3
8/21/13	3	7.52	0.1	1.7	0.32	ND (<0.01*)	26

Abbreviations: CBOD5 – 5-day Carbonaceous Biochemical Oxygen Demand, TKN – Total Kjeldahl Nitrogen, ND- Non-detect. \* - Lead is only tested monthly (July 7 – 8, 2013 and August 15 – 16, 2013).

**Table 6.** Copper concentrations of effluent, upstream, simulated downstream water and laboratory water.

Date Collected	Sample	Copper (µg/L)	
		Total	Dissolved
7/19/13	Effluent	18	16
	Upstream	2.1	2.2
	Simulated Downstream	13	12
	Laboratory	1.7	1.7
8/21/13	Effluent	24	19
	Upstream	1.3	1.5
	Simulated Downstream	18	15
	Laboratory	ND (<0.5)	ND (<0.5)



SUPPLEMENTAL REPORT  
DAILY EFFLUENT MONITORING

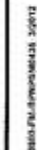
Facility Name:	Park Creek STP	County:	Montgomery	Month:	7 (last meeting)	Year:	2013
Municipality:	Horseshoe Township			Permit No.:	PA001845-A-1	Outfall:	501
Watershed:	2-F			Renewal application due:	180 days prior to expiration.		
Laboratory:	holder			This permit will expire on:	December 31, 2014		

Flow	pH	Dissolved Oxygen	CHODS	TSS	Fecal Coliform	NO3-N	TNH	Total Phosphorus		Total Copper		Total Lead
								mg/L	mg/L	mg/L	mg/L	
1	7.3	7.7	3.0	5.0		7.78	2.4	0.02	0.032			
2	7.2	7.7	2.0	7.0		8.06	1.1	0.04	0.023			
3	7.3	7.8	3.0	5.0		7.41	1.3	0.6	0.026			
4	7.3	7.8	3.0	5.0		6.87	1.5	0.84	0.028			
5	7.2	7.8	4.0	6.0		8.23	1.3	0.56	0.027			
6	7.3	7.8	3.0	5.0		7.62	1.4	0.24	0.019			
7	7.3	7.7	2.0	4.0		6.52	3.0	0.16	0.021			
8	7.3	7.8	3.0	5.0		6.56	1.4	0.2	0.029			
9	7.3	7.8	3.0	5.0		7.1	1.2	0.23	0.024			
10	7.3	7.8	3.0	5.0		6.5	0.7	0.08	0.022			
11	7.3	7.7	2.0	4.0								
12	7.3	7.7	2.0	4.0								
13	7.3	7.7	2.0	4.0								
14	7.3	7.7	2.0	4.0								
15	7.3	7.7	2.0	4.0								
16	7.3	7.7	2.0	4.0								
17	7.3	7.7	2.0	4.0								
18	7.3	7.7	2.0	4.0								
19	7.3	7.7	2.0	4.0								
20	7.3	7.7	2.0	4.0								
21	7.3	7.7	2.0	4.0								
22	7.3	7.7	2.0	4.0								
23	7.3	7.7	2.0	4.0								
24	7.3	7.7	2.0	4.0								
25	7.3	7.7	2.0	4.0								
26	7.3	7.7	2.0	4.0								
27	7.3	7.7	2.0	4.0								
28	7.3	7.7	2.0	4.0								
29	7.3	7.7	2.0	4.0								
30	7.3	7.7	2.0	4.0								
31	7.3	7.7	2.0	4.0								
32	7.3	7.7	2.0	4.0								
33	7.3	7.7	2.0	4.0								
34	7.3	7.7	2.0	4.0								
35	7.3	7.7	2.0	4.0								
36	7.3	7.7	2.0	4.0								
37	7.3	7.7	2.0	4.0								
38	7.3	7.7	2.0	4.0								
39	7.3	7.7	2.0	4.0								
40	7.3	7.7	2.0	4.0								
41	7.3	7.7	2.0	4.0								
42	7.3	7.7	2.0	4.0								
43	7.3	7.7	2.0	4.0								
44	7.3	7.7	2.0	4.0								
45	7.3	7.7	2.0	4.0								
46	7.3	7.7	2.0	4.0								
47	7.3	7.7	2.0	4.0								
48	7.3	7.7	2.0	4.0								
49	7.3	7.7	2.0	4.0								
50	7.3	7.7	2.0	4.0								
51	7.3	7.7	2.0	4.0								
52	7.3	7.7	2.0	4.0								
53	7.3	7.7	2.0	4.0								
54	7.3	7.7	2.0	4.0								
55	7.3	7.7	2.0	4.0								
56	7.3	7.7	2.0	4.0								
57	7.3	7.7	2.0	4.0								
58	7.3	7.7	2.0	4.0								
59	7.3	7.7	2.0	4.0								
60	7.3	7.7	2.0	4.0								
61	7.3	7.7	2.0	4.0								
62	7.3	7.7	2.0	4.0								
63	7.3	7.7	2.0	4.0								
64	7.3	7.7	2.0	4.0								
65	7.3	7.7	2.0	4.0								
66	7.3	7.7	2.0	4.0								
67	7.3	7.7	2.0	4.0								
68	7.3	7.7	2.0	4.0								
69	7.3	7.7	2.0	4.0								
70	7.3	7.7	2.0	4.0								
71	7.3	7.7	2.0	4.0								
72	7.3	7.7	2.0	4.0								
73	7.3	7.7	2.0	4.0								
74	7.3	7.7	2.0	4.0								
75	7.3	7.7	2.0	4.0								
76	7.3	7.7	2.0	4.0								
77	7.3	7.7	2.0	4.0								
78	7.3	7.7	2.0	4.0								
79	7.3	7.7	2.0	4.0								
80	7.3	7.7	2.0	4.0								
81	7.3	7.7	2.0	4.0								
82	7.3	7.7	2.0	4.0								
83	7.3	7.7	2.0	4.0								
84	7.3	7.7	2.0	4.0								
85	7.3	7.7	2.0	4.0								
86	7.3	7.7	2.0	4.0								
87	7.3	7.7	2.0	4.0								
88	7.3	7.7	2.0	4.0								
89	7.3	7.7	2.0	4.0								
90	7.3	7.7	2.0	4.0								
91	7.3	7.7	2.0	4.0								
92	7.3	7.7	2.0	4.0								
93	7.3	7.7	2.0	4.0								
94	7.3	7.7	2.0	4.0								
95	7.3	7.7	2.0	4.0								
96	7.3	7.7	2.0	4.0								
97	7.3	7.7	2.0	4.0								
98	7.3	7.7	2.0	4.0								
99	7.3	7.7	2.0	4.0								
100	7.3	7.7	2.0	4.0								

[illegible]

Prepared By: Richard H. Foor License No. 273735  
 Title: Assistant Superintendent Date: \_\_\_\_\_



SUPPLEMENTAL REPORT  
DAILY EFFLUENT MONITORING

Facility Name:	Park Creek STP	County:	Montgomery	Month:	7 (last meeting)	Year:	2013
Municipality:	Horseshoe Township			Permit No.:	PA001845-A-1	Outfall:	501
Watershed:	2-F			Renewal application due:	180 days prior to expiration.		
Laboratory:	holder			This permit will expire on:	December 31, 2014		

Week	Day	Date	Flow MGD	pH	Dissolved Oxygen		CHODS		TSB		Fecal Coliform		NO2-N + NO3-N		NH3-N		TOD	Total Phosphorus		Total Copper		Total Lead	
					g	mg/L	g	mg/L	g	mg/L	g	mg/L	g	mg/L	g	mg/L		g	mg/L	g	mg/L	g	mg/L
1	Bas	4/25/13	0.707																				
	Mon	7/11/13	1.290	7.3			3.0		5.0				7.78		0.1		2.4		0.62		0.032		
	Tue	7/22/13	0.669	7.2			2.9		7.0				8.06		0.1		1.1		0.64		0.023		
	Wed	7/30/13	0.768	7.3																			
	Thu	7/24/13	0.817	7.2			3.0		5.0				7.41		0.1		1.3		0.6		0.026		
2	Fri	7/26/13	0.745	7.3																			
	Sat	7/27/13	0.702	7.5																			
	Mon	7/11/13	0.746	7.2			4.0		4.0				6.87		0.1		1.5		0.64		0.026		0.31
	Tue	7/22/13	0.818	7.2																			
	Wed	7/30/13	0.791	7.3									8.52		0.1		1.3		0.56		0.027		
3	Thu	7/11/13	0.797	7.0			3.0		3.0														
	Fri	7/22/13	0.947	7.3																			
	Sat	7/23/13	0.87	7.3																			
	Mon	7/14/13	0.860	7.3			2.0		4.0				7.62		0.1		1.4		0.24		0.019		
	Tue	7/15/13	0.896	7.3																			
4	Wed	7/16/13	0.854	7.2																			
	Thu	7/17/13	0.947	7.4																			
	Fri	7/18/13	0.676	7.3			2.0		4.0				6.52		0.1		3.0		0.16		0.021		
	Sat	7/20/13	0.852	7.3																			
	Mon	7/22/13	0.896	7.3			3.0		2.0				6.56		0.1		1.4		0.2		0.029		
5	Tue	7/23/13	0.959	7.3																			
	Wed	7/24/13	0.945	7.2			3.0		3.0				7.1		0.1		1.2		0.23		0.024		
	Thu	7/25/13	0.843	7.3																			
	Fri	7/26/13	0.739	7.3																			
	Sat	7/27/13	0.746	7.4																			
6	Mon	7/22/13	0.795	7.4			6.0		2.0				6.5		0.1		0.7		0.05		0.022		
	Tue	7/30/13	0.806	7.5																			
	Wed	7/31/13	0.794	7.4																			
	Thu	8/1/13	0.925	7.4			2.0		4.0														
	Fri	8/2/13	0.947																				
7	Sat	8/3/13	0.812																				
	Sat	8/3/13	0.812																				
Daily Minimum (Cont.)				7	7.3		2		2		2		6.5		0.1		0.7		0.05		0.019		0.61
Daily Maximum (Cont.)				7.9	8.5		8		7		10		9.62		0.1		3		0.94		0.032		0.61
Mean Average (Cont.)							3		6				7.6		0.1		2.2		0.72		0.028		0.61
Average (Cont.)																	1.5		0.4		0.023		0.61
Mean Average (Cont.)																							
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Prepared By: Richard H. Foor License No.: 273735  
 Title: Assistant Superintendent Date: \_\_\_\_\_

# **Pennsylvania Department of Environment Protection Discharge Monitoring Report (DMR)**

**FACILITY:** PARK CREEK STP      **PERMIT NUMBER:** PA0051985      **REGION:** EP SE Rgnl Off  
**PERMITTEE:** HORSHAM TWP WATER & SEW AUTH      **OUTFALL:** 001      **COUNTY:** Montgomery  
MONTGOMERY CNTY      **CITY:** HORSHAM  
**ADDRESS:** 617 HORSHAM ROAD      **MONITORING PERIOD:** From: 2013-07-01 NO DISCHARGE  
HORSHAM, PA 19044      To: 2013-07-31      **FROM SITE:** ( )

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Value	Value		Value	Value	Value				
Dissolved Oxygen	Sample Measurement	****	****		7.3	****	****	mg/L	0	1/day	Grab
Parameter Code: 00300 Stage Code: 1	Permit Requirement	****	****		5.0 Instantaneous Minimum	****	****			1/day	Grab
pH	Sample Measurement	****	****		7.0	****	7.6	S.U.	0	1/day	Grab
Parameter Code: 00400 Stage Code: 1	Permit Requirement	****	****		6.0 Instantaneous Minimum	****	9.0 Instantaneous Maximum			1/day	Grab
Total Suspended Solids	Sample Measurement	29	45	lbs/day	****	4	6	mg/L	0	2/week	24-Hr Composite
Parameter Code: 00530 Stage Code: 1	Permit Requirement	250 Average Monthly	375 Weekly Average		****	30 Average Monthly	45 Weekly Average			1/week	24-Hr Composite
Ammonia-Nitrogen	Sample Measurement	0.7	****	lbs/day	****	0.1	****	mg/L	0	2/week	24-Hr Composite
Parameter Code: 00610 Stage Code: 1	Permit Requirement	21.0 Average Monthly	****		****	2.5 Average Monthly	****			1/week	24-Hr Composite
Total Kjeldahl Nitrogen	Sample Measurement	11	****	lbs/day	****	1.5	****	mg/L	0	2/week	24-Hr Composite
Parameter Code: 00625 Stage Code: 1	Permit Requirement	Report Average Monthly	****		****	Report Average Monthly	****			1/week	24-Hr Composite
Nitrate-Nitrite as N	Sample Measurement	53	****	lbs/day	****	7.6	****	mg/L	0	2/week	24-Hr Composite
Parameter Code: 00630 Stage Code: 1	Permit Requirement	71.0 Average Monthly	****		****	8.5 Average Monthly	****			1/week	24-Hr Composite
Total Phosphorus	Sample Measurement	3.1	****	lbs/day	****	0.4	****	mg/L	0	2/week	24-Hr Composite
Parameter Code: 00665 Stage Code: 1	Permit Requirement	7.3 Average Monthly	****		****	0.9 Average Monthly	****			1/week	24-Hr Composite
Name/Title of Principal Executive Officer Or Authorized Agent	I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).						Signature of Principal Executive Officer Or Authorized Agent	Telephone No	Date		
									2013-08-19		

Report all violations during the reporting period on a Non-Compliance Reporting Form, as an attachment to your eDMR submission. Page 1

# **Pennsylvania Department of Environment Protection Discharge Monitoring Report (DMR)**

**FACILITY:** PARK CREEK STP      **PERMIT NUMBER:** PA0051985      **REGION:** EP SE Rgnl Off  
HORSHAM TWP WATER &





PERMITTEE: SEW AUTH MONTGOMERY CNTY      OUTFALL: 001      COUNTY: Montgomery  
 ADDRESS: 617 HORSHAM ROAD      MONITORING PERIOD: From: 2013-07-01 To: 2013-07-31      CITY: HORSHAM  
 NO DISCHARGE FROM SITE: ( )

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Value	Value		Value	Value	Value				
Total Copper	Sample Measurement	*****	*****		*****	0.025	0.032	mg/L	0	2/week	24-Hr Composite
Parameter Code: 01042 Stage Code: 1	Permit Requirement	*****	*****		*****	Report Average Monthly	Report Daily Maximum			1/week	24-Hr Composite
Total Lead	Sample Measurement	*****	*****		*****	0.01	0.01	mg/L	0	1/month	24-Hr Composite
Parameter Code: 01051 Stage Code: 1	Permit Requirement	*****	*****		*****	Report Average Monthly	Report Daily Maximum			1/month	24-Hr Composite
Flow (mgd)	Sample Measurement	0.828	0.845	MGD	*****	*****	*****		0	Continuous	Metered
Parameter Code: 50050 Stage Code: 1	Permit Requirement	Report Average Monthly	Report Weekly Average		*****	*****	*****			Continuous	Metered
Fecal Coliform	Sample Measurement	*****	*****		*****	3	10	No./100 ml	0	2/week	Grab
Parameter Code: 74055 Stage Code: 1	Permit Requirement	*****	*****		*****	200 Geometric Mean	1000 Instantaneous Maximum			1/week	Grab
CBOD5	Sample Measurement	22	34	lbs/day	*****	3	5	mg/L	0	2/week	24-Hr Composite
Parameter Code: 80082 Stage Code: 1	Permit Requirement	83 Average Monthly	125 Weekly Average		*****	10 Average Monthly	15 Weekly Average			1/week	24-Hr Composite
Name/Title of Principal Executive Officer Or Authorized Agent	I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).						Signature of Principal Executive Officer Or Authorized Agent		Telephone No	Date	
										2013-08-19	

Report all violations during the reporting period on a Non-Compliance Reporting Form, as an attachment to your eDMR submission. Page 2



# **Pennsylvania Department of Environment Protection Discharge Monitoring Report (DMR)**

**FACILITY:** PARK CREEK STP      **PERMIT NUMBER:** PA0051985      **REGION:** EP SE Rgnl Off  
**PERMITTEE:** HORSHAM TWP WATER & SEW AUTH      **OUTFALL:** 001      **COUNTY:** Montgomery  
MONTGOMERY CNTY      **CITY:** HORSHAM  
**ADDRESS:** 617 HORSHAM ROAD      **MONITORING PERIOD:** From: 2013-08-01 NO DISCHARGE  
HORSHAM, PA 19044      To: 2013-08-31      **FROM SITE:** ( )

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Value	Value		Value	Value	Value				
Dissolved Oxygen	Sample Measurement	****	****		7.2	****	****		0	1/day	Grab
Parameter Code: 00300	Permit Requirement	****	****		5.0	****	****	mg/L		1/day	Grab
Stage Code: 1					Instantaneous Minimum	****	****				
pH	Sample Measurement	****	****		7.0	****	7.5		0	1/day	Grab
Parameter Code: 00400	Permit Requirement	****	****		6.0	****	9.0	S.U.		1/day	Grab
Stage Code: 1					Instantaneous Minimum	****	Instantaneous Maximum				
Total Suspended Solids	Sample Measurement	32	44		****	4	5		0	2/week	24-Hr Composite
Parameter Code: 00530	Permit Requirement	250	375	lbs/day	****	30	45	mg/L		1/week	24-Hr Composite
Stage Code: 1		Average Monthly	Weekly Average			Average Monthly	Weekly Average				
Ammonia-Nitrogen	Sample Measurement	2.0	****		****	0.2	****		0	2/week	24-Hr Composite
Parameter Code: 00610	Permit Requirement	21.0	****	lbs/day	****	2.5	****	mg/L		1/week	24-Hr Composite
Stage Code: 1		Average Monthly	****			Average Monthly	****				
Total Kjeldahl Nitrogen	Sample Measurement	10	****		****	1.4	****		0	2/week	24-Hr Composite
Parameter Code: 00625	Permit Requirement	Report	****	lbs/day	****	Report	****	mg/L		1/week	24-Hr Composite
Stage Code: 1		Average Monthly	****			Average Monthly	****				
Nitrate-Nitrite as N	Sample Measurement	47.0	****		****	6.7	****		0	2/week	24-Hr Composite
Parameter Code: 00630	Permit Requirement	71.0	****	lbs/day	****	8.5	****	mg/L		1/week	24-Hr Composite
Stage Code: 1		Average Monthly	****			Average Monthly	****				
Total Phosphorus	Sample Measurement	1.8	****		****	0.3	****		0	2/week	24-Hr Composite
Parameter Code: 00665	Permit Requirement	7.3	****	lbs/day	****	0.9	****	mg/L		1/week	24-Hr Composite
Stage Code: 1		Average Monthly	****			Average Monthly	****				
Name/Title of Principal Executive Officer Or Authorized Agent		I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).						Signature of Principal Executive Officer Or Authorized Agent		Telephone No	Date
											2013-09-17

Report all violations during the reporting period on a Non-Compliance Reporting Form, as an attachment to your eDMR submission. Page 1

# **Pennsylvania Department of Environment Protection Discharge Monitoring Report (DMR)**

**FACILITY:** PARK CREEK STP      **PERMIT NUMBER:** PA0051985      **REGION:** EP SE Rgnl Off  
HORSHAM TWP WATER &



PERMITTEE: SEW AUTH MONTGOMERY CNTY      OUTFALL: 001      COUNTY: Montgomery  
 ADDRESS: 617 HORSHAM ROAD      MONITORING PERIOD: From: 2013-08-01 To: 2013-08-31      CITY: HORSHAM  
 NO DISCHARGE FROM SITE: ( )

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		Value	Value		Value	Value	Value				
Total Copper	Sample Measurement	****	****		****	0.027	0.032	mg/L	0	2/week	24-Hr Composite
Parameter Code: 01042 Stage Code: 1	Permit Requirement	****	****		****	Report Average Monthly	Report Daily Maximum			1/week	24-Hr Composite
Total Lead	Sample Measurement	****	****		****	0.01	0.01	mg/L	0	1/month	24-Hr Composite
Parameter Code: 01051 Stage Code: 1	Permit Requirement	****	****		****	Report Average Monthly	Report Daily Maximum			1/month	24-Hr Composite
Flow (mgd)	Sample Measurement	0.815	0.919	MGD	****	****	****		0	Continuous	Metered
Parameter Code: 50050 Stage Code: 1	Permit Requirement	Report Average Monthly	Report Weekly Average		****	****	****			Continuous	Metered
Fecal Coliform	Sample Measurement	****	****		****	10	50	No./100 ml	0	2/week	Grab
Parameter Code: 74055 Stage Code: 1	Permit Requirement	****	****		****	200 Geometric Mean	1000 Instantaneous Maximum			1/week	Grab
CBOD5	Sample Measurement	22	29	lbs/day	****	3	5	mg/L	0	2/week	24-Hr Composite
Parameter Code: 80082 Stage Code: 1	Permit Requirement	83 Average Monthly	125 Weekly Average		****	10 Average Monthly	15 Weekly Average			1/week	24-Hr Composite
Name/Title of Principal Executive Officer Or Authorized Agent	I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).						Signature of Principal Executive Officer Or Authorized Agent		Telephone No	Date	
											2013-09-17

Report all violations during the reporting period on a Non-Compliance Reporting Form, as an attachment to your eDMR submission. Page 2

We hope this satisfies EPA's comments regarding Park Creek STP's permit amendment.

**Laurel Ateyeh** | Environmental Engineering Specialist  
Department of Environmental Protection | Southeast Regional Office  
2 East Main Street | Norristown, PA 19401  
Phone: 484.250.5198 | Fax: 484.250.5971  
[www.depweb.state.pa.us](http://www.depweb.state.pa.us)

**From:** Blanco-Gonzalez, Joel [<mailto:Blanco-Gonzalez.Joel@epa.gov>]  
**Sent:** Friday, December 12, 2014 2:27 PM  
**To:** Ateyeh, Laurel  
**Cc:** Patel, Pravin; Trulear, Brian; Cruz, Francisco  
**Subject:** Draft Permit Comments - Horsham Water & Sewer Authority - PA0051985 A2

On behalf of Ms. Dana Walker

Laurel,

According to the Memorandum of Agreement (MOA) between the U.S. Environmental Protection Agency (EPA) Region III and the Pennsylvania Department of Environmental Protection (DEP), the EPA has reviewed the draft National Pollutant Discharge Elimination System (NPDES) permit for:

Draft Permit: Horsham Water & Sewer Authority  
Also Known As: Park Creek STP  
NPDES ID: PA0051985 A2  
EPA Received: December 9, 2014

EPA has chosen to perform a limited review of the water-effect ratio (WER) study requirements. As a result of our limited review, we offer the following comments.

1. Following comments provided by Ms. Denise Hakowski of EPA (see below), please compare the effluent quality in the attached document with the permit limits and make sure it is in compliance and document your rationale in the fact sheet accordingly. Additionally, please, as a guidance, follow the steps listed in the [WER Study Review Checklist](#) to support your rationale

Please address our comments and recommendations, and provide us with any changes to the draft permit, fact sheet, and/or permit components.

If you have any questions concerning this matter, please contact us.

Respectfully,

Joel

Joel Blanco-González  
NPDES Permits Branch (3WP41)  
Office of Permits and Enforcement  
Water Protection Division | U.S. EPA Region III  
1650 Arch Street | Philadelphia, PA 19103 - 2029  
Phone: (215) 814 - 2768 | Fax: (215) 814 - 2302  
Email: [blanco-gonzalez.joel@epa.gov](mailto:blanco-gonzalez.joel@epa.gov)

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From: Hakowski, Denise  
Sent: Friday, June 27, 2014 2:41 PM  
To: Barron, Thomas  
Cc: Walker, Dana; Trulear, Brian  
Subject: Comments on Horsham WSA -- Park Creek Cu WER  
Attachments: SKMBT\_C554e14062414190.pdf

I have reviewed the subject WER, and I have one follow up.

Everything looks fine, but under “Characterization of the Effluent” (which is the attached pdf), the report says “effluent quality varied with each sample as expected.” I don’t care if it varied, we are more interested that the plant was operating normally, and I would say that as long as it is meeting its effluent limits, we are not going to find that it wasn’t.

So, as a follow up, we should compare the effluent quality in the attached with the permit limits and just make sure it is in compliance.

That’s it. I think that was all the PA WERs that I currently had on my desk, so other than the Wellsboro issue, let me know if I am missing anything.

Thanks,

Denise